## Town of Fairview 7400 Concord Highway Monroe NC 28110

## **CHANGE IN USE, NONCONFORMING** SITUATION

ZONING PERMIT		<b>4 ₹</b> 0	<b>RA-40</b>	
Permit Number:	Date:	Fee Paid:	Check Number:	
Name:		Phone Number:  Applicant		
Street Address:	City	State	Zip	
Street:		ot Information mber:	Lot Area (Acres):	
Owner Name:		Phone Number:		
Existing Use:		Proposed Use:		
Will any external improvement housing the use?	ts (e.g. external upfi	ts, additions, accessory	buildings) be made to the structure	
	Yes:	No:		
Will any new signs be installed	? Yes:	No:		
If YES, please	attach a descriptio	on/sketch of any impi	rovements to be made.	
			erse impact on those most affected by it and eration at the time the permit is applied for;	
AND that the existing nonconformi	ng use has not been dis	scontinued for a consecuti	ve period of 180 days or more;	
knowledge. I further certify that	t I am familiar with al acknowledge that any	l requirements of the Toy violation of this ordinar	s is true and correct to the best of my wn of Fairview Land Use Ordinance ace will be grounds for revoking this permit	
APPLICANT SIGNATURE			DATE	
THIS PERMIT IS: APPRO	OVED		DISAPPROVED	
LAND USE ADMINISTRATOR	R		DATE	
Comments:				